

STATE OF WISCONSIN, CIRCUIT COURT, MARINETTE COUNTY

For Official Use

IN THE MATTER OF:

**WILL
FILED WITHOUT
PROBATE**

Decedent

Case No. _____

Date of Birth

Address of decedent: _____

Date of death: _____

Name of filing party: _____

Address: _____

Phone number: _____

Probate to be filed: yes or no

Attorney: _____

Received by:

☐ Register in Probate ☐ Deputy Register in Probate